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		CLAIM		S FILED - PART I				110	/ /)	م ر	40	<u>Y</u> .	_	
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	n me omere			ess than zero, enter "0" in column 2			TOT	AL G	721	L	TOTAL	-	_	
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If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE The "Highest Number Previously Paid For" (Tittal or less than 3, enter "3."									OR		DTAL	-		
The	*Highest Numb	er Previously Paid	of For IN THIS For (Total or	SPACE is less than Independent) is the	13, enter "3." highest number (ADDIT	FEE L		A TOP					
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														